

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09/575, 198

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	325 minus 20 =	* 305
INDEPENDENT CLAIMS	1 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY  
TYPE ☐

OR

OTHER THAN  
SMALL ENTITY

RATE	FEE
	345.00
X\$ 9=	2745
X39=	
+130=	130
TOTAL	3220

OR

OR

OR

OR

OR

RATE	FEE
	690.00
X\$18=	
X78=	
+260=	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 237	Minus	** 325	= 0
	Independent	* 2	Minus	*** 3	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: \_\_\_\_\_

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	<u>201/101</u>			<u>345</u>	<u>690</u>	=	<u>345</u>
Total Claims >20	<u>203/103</u>	<u>325</u> -20 =	<u>305</u> X	<u>9</u>	<u>18</u>	=	<u>2745</u>
Independent Claims >3	<u>202/102</u>	<u>1</u> -3 =	X	<u>39</u>	<u>78</u>	=	
Mult. Dep Claim Present	<u>204/104</u>			<u>130</u>	<u>260</u>	=	<u>130</u>
Surcharge	<u>205/105</u>			<u>65</u>	<u>130</u>	=	
English Translation	<u>139</u>					=	
<b><u>TOTAL FEE CALCULATION</u></b>							<u>3220</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 3220

Less Filing Fees Submitted - \$ 795

BALANCE DUE = \$ 2425

Marcia Gordon  
Office of Initial Patent Examination

3 assignments